

THE ROLE OF THERAPEUTIC SERVICES

Written by Karen Wills, DIDD Therapeutic Services Director

Therapeutic services include physical therapy, occupational therapy, speech language pathology, audiology, nutrition, and orientation and mobility services. Therapeutic service clinicians assist individuals in overcoming barriers to accomplishing personal goals and to attain and maintain optimal health and safety related to day to day tasks and activities. Some of the many things therapeutic services providers can assist an individual with include improving balance when walking, communicating wants, needs and feelings, learning to eat a healthy diet, eating safely, adapting tasks and environments to meet physical and/or sensory needs, improving work-related skills, and developing independence in getting around a home when there are visual impairments.

The need for a therapeutic service assessment may be identified in a variety of ways. People moving from a developmental center may have received therapeutic services and supports that may need to be reassessed as they move into the community and adjust to their new environments and establish new daily routines. For others who are currently living in the community, the independent support coordinator, case manager, family, guardian, residential or day service providers, advocates, and/or the primary care physician may identify therapeutic service needs.

The following are common areas of concern for individuals with mental retardation and developmental disabilities and can be assessed by the corresponding clinician:

Occupational Therapist

- Eating and drinking
- Sensory challenges such as defensiveness, self-injurious behaviors
- Oral hygiene
- Bathing and other activities of daily living

Physical Therapist

- Wheelchair positioning
- Alternate positioning
- Transfers
- Mobility

Speech Language Pathologist

- Eating and drinking
- Communication

Audiologist

- Unrecognized hearing loss
- Adapting environments to help with hearing issues
- Assessing for and adapting to hearing aids

Nutritionist

- Eating healthy, following special diets and menu planning
- Impact of genetic disorders, etc. on dietary needs
- Drug-nutrient interactions
- Impact of nutrition on chronic diseases

Orientation and Mobility (O&M)

- Impact of severe visual impairment/blindness on daily function
- Making use of other sensory systems (i.e. vision, hearing, touch, etc.) in order to make sense of the day
- Accessing the environment

When there are issues of concern in the above areas, an assessment may be indicated. An assessment should clearly identify how individual limitations are impacting function in order to justify the need for any recommended services. A plan of care is then drafted to include recommended goals, interventions, and timeframes for completion. Assessments recommendations should identify interventions needed to support the person in accomplishing their outcomes and actions across environments (i.e. home, work, community) as appropriate. The individual and his/her Circle of Support determine to what extent they desire recommended services to address areas of concern.

Therapeutic services are provided when they are necessary to provide strategies or techniques for promoting an individual's health and safety or to address a barrier to the individual achieving an important outcome or action. When the individual is at risk due to health and safety issues, direct support staff and clinical providers need to collaborate on the development of staff instructions, which outline necessary techniques for carrying out certain daily activities. In order for these techniques to make an impact, they must be used by all staff responsible for assisting the individual and be consistently incorporated in the individual's daily routine (e.g. the residential staff and day staff must all use the correct positioning, food preparation and eating techniques developed by the clinician for an individual prone to choking since, of course, the clinician will not be in attendance at each meal). Staffs need to inform the clinician when these techniques are not working.

When there is a barrier to the individual achieving an outcome or action, the clinician's role is to develop techniques to overcome the barrier. For example, an individual wants to increase the amount of spending money he has by improving his production speed at work. However, he is extremely awkward in using his

hands and has been frustrated in his attempts to work faster. The clinician may develop an assistive device or alternative approach to the task that the individual could use to improve his performance and earn more money. The clinician may also recommend other activities that can be incorporated into his daily routine that may also improve his dexterity. These could be provided in the form of staff instructions for staff to carry out on a consistent basis according to a schedule.

Clinicians may provide direct hands-on skilled services for an individual in order to build specific skills, trial assistive devices, and determine appropriate strategies to promote skills. These services should be provided in the natural setting appropriate to the task. Only rarely will the clinician work directly with an individual in a setting apart from his support staff and/or daily routine, and then for a limited duration. Once the individual reaches a certain level with the new skill, or is ready to use an assistive device on a regular basis, support staff must learn to carry out the procedure since the clinician will not be on site to conduct it often enough to benefit the person. This can be accomplished through the development and use of staff instructions.

Once the staff has learned the necessary techniques, the clinician's role is to monitor whether the techniques are working for the person or need to be revised, whether staff are able to carry them out correctly or need more training, and to assess the person's progress. Staffs need to inform clinicians when these techniques are not working. Data is obtained and analyzed to determine progress, lack of progress or maintenance of a stable status. Any necessary changes are discussed, considered, and implemented as appropriate. Consequently, the provider and clinician must plan together how to implement the interventions and how they can be integrated into the individual's daily routine within an appropriate staffing plan for the group of individuals for which the staff is responsible. Working together, clinicians and direct support professionals/families can assist individuals to meet their personal goals, improve skills, improve health and safety and live a more active, involved and meaningful life.